

K. BREASTFEEDING PROMOTION AND SUPPORT GUIDELINES

Overview

Introduction

The Utah WIC Program is dedicated to promoting optimal nutritional practices among its participants. Breastfeeding is known to have significant physiological, nutritional and psychological benefits for both women and infants. Breastfeeding has been rediscovered by modern science as a means to save lives, reduce illness and protect the environment. Policy makers are increasingly aware that breastfeeding promotion efforts can reduce health care costs and enhance maternal and infant well-being.

Public Law 101-147

In November, 1989 Congress passed legislation that mandated the Special Supplemental Nutrition Program for Women, Infants and Children promote and protect breastfeeding. This legislation earmarked monies for breastfeeding; defined breastfeeding, and required states to:

- designate state and local agency breastfeeding coordinators
 - write a plan to assure that women have access to breastfeeding promotion and protection
 - annually evaluate breastfeeding plans
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NAWD breastfeeding statement

In 1989, the National Association of WIC Directors (NAWD) issued a position paper on Breastfeeding Promotion in the WIC Program. In this paper they issued a strong statement in support of breastfeeding:

“Breastfeeding has been shown to have significant advantages for women and infants. As health professionals have a responsibility to provide services designed to optimize the health of their clients, WIC Health professionals are committed to encouraging breastfeeding as the preferred method of infant feeding. Therefore, the National Association of WIC Directors calls for all WIC state and local agencies to aggressively promote breastfeeding.”

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Overview, Continued

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K.1. Breastfeeding Promotion and Support

Policy	Breastfeeding promotion and support will be integrated into the continuum of prenatal and postpartum nutrition education. All pregnant and breastfeeding WIC participants will be provided with breastfeeding education and support. Positive breastfeeding messages must be incorporated into all relevant educational activities, materials and outreach efforts where infant feeding is addressed.
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Year 2010 objectives	<p>The Utah Department of Health, WIC Program, joins with the U.S. Department of Health and Human Services with a goal of meeting the Year 2010 Objectives for the Nation of:</p> <ul style="list-style-type: none">• Increasing to at least 75% the proportion of mothers who breastfeed their infants in the early postpartum period, and• Increasing to at least 50% those who continue to breastfeed until their infant is five to six months of age, and• Increasing to at least 25% those who continue to breastfeed until their infant is 12 months of age. <p>To work toward these goals, the Utah WIC program will serve as an advocate for breastfeeding, by helping to ensure that women have the ability to make an informed decision about infant feeding, and ultimately by helping support women's infant feeding decisions.</p>
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AAP Statement HHS Blueprint	<p>Program goals and philosophy on breastfeeding are also based on two other significant documents. First, is the American Academy of Pediatrics Policy Statement on Breastfeeding and the Use of Human Milk. This statement reflects the scientific knowledge of the benefits of breastfeeding and sets forth principles to guide health care providers to promote, protect and support breastfeeding in the community as well as the nation as a whole. It recommends breastfeeding should continue until the infant is at least 12 months of age and thereafter for as long as mutually desired.</p> <p>Second, is the Department of Health and Human Services Blueprint for Action on Breastfeeding. This document establishes a comprehensive breastfeeding policy for the nation and introduces an action plan for breastfeeding based on education, training, awareness, support and research.</p>
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K.1. Breastfeeding Promotion and Support, Continued

Utah WIC breastfeeding guidelines

In order to effectively encourage and support breastfeeding among WIC women, the following guidelines adapted from the National Association of WIC Director's Guidelines for Breastfeeding Promotion are recommended in all WIC clinics in Utah.

Breastfeeding promotion philosophy

All pregnant WIC participants must be encouraged to breastfeed unless contraindicated for health reasons (e.g. HIV positive, illegal drug use, use of contraindicated drugs and/or medications, etc.).

All WIC prenatal and postpartum participants should receive counseling/education which:

- integrates breastfeeding promotion into the continuum of prenatal care and postpartum care
- includes an assessment of participant's knowledge, concerns and attitudes related to breastfeeding at the earliest opportunity in the prenatal period. (The Prenatal Survey on Infant Feeding is to be used to solicit this information)
- provides prenatal and postpartum education based on this assessment.

Prenatal counseling/education should include helping the mother to communicate effectively with hospital staff, physician and/or her health care provider about her decision to breastfeed.

The participant's family and friends should be included in breastfeeding education and support sessions, whenever possible.

A mechanism must be implemented in each WIC clinic to incorporate a method of positive peer influence into breastfeeding education (e.g. peer support counselors, bulletin boards of successful breastfeeding WIC participants, peer testimonials in classes, peer discussion groups, etc.)

K.2. Minimum Staffing Required for Breastfeeding Activities

Required Local Agency Breastfeeding Coordinator

Each local agency must designate a trained lactation educator who is responsible for coordinating breastfeeding promotion and support activities. Responsibilities for this position are briefly outlined below. This coordinator should be interested in breastfeeding, be knowledgeable about breastfeeding and must have supervisory support. Minimum requirements for this position are that they:

- be competent Professional Authority, and
 - a Lactation Educator, who has completed a state approved training course and has completed all the requirements from that course which may include an exam and/or coursework.
 - have 6 months of experience in counseling women about how to breastfeed successfully
 - recommend to have the credentials of CLE or LE
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Role of local breastfeeding coordinator

The local agency Breastfeeding Coordinator works directly with the local agency WIC Administrator to prepare and manage the local agency breastfeeding policy and program. Responsibilities of this position include:

- Preparing the breastfeeding portion of the local Nutrition Education Plan;
 - Ensuring local agency compliance with all Utah WIC Program breastfeeding policies;
 - Overseeing the planning, implementation and evaluation of breastfeeding promotion and support activities and staff training;
 - Ensuring that all local agency staff who work with pregnant or breastfeeding participants receive the required training and understand the State's Breastfeeding Policy and their roles and responsibilities pertaining to the WIC Breastfeeding Program;
 - Coordinating the ordering, inventorying, maintaining and distribution of breastfeeding aids;
 - Preparing the peer counseling grant and grant evaluations, and coordinating the agency's peer counseling program;
 - Keeping current with the latest breastfeeding information and informing staff of new recommendations;
 - Identifying, coordinating and collaborating with community breastfeeding resources;
 - Monitoring local agency breastfeeding rates.
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K.2. Minimum Staffing Required for Breastfeeding Activities;

Continued

**Other
breastfeeding
support staff**

Other staff who may help to promote and support breastfeeding are lactation educators, peer counselors and all other WIC staff. WIC clinics can develop their own breastfeeding support teams. All WIC staff and any non-WIC staff can be trained using the WIC Breastfeeding Peer Counselor Training Program developed by the Mountain Plains Region WIC State Agencies.

**Peer
Counselors**

See K.6. Breastfeeding Positive Peer Support

K.3. Breastfeeding Training and Inservices

Purpose Ongoing training and inservices for staff on breastfeeding management and promotion allows for better consistency and accuracy of information given to participants. It also encourages staff to project a positive attitude toward breastfeeding to the WIC participants.

Required staff training and inservice schedule All staff members who promote breastfeeding must receive at a minimum:

Staff Members	Frequency	Training/Inservices Provided
All WIC employees	Within first month of hiring	<ul style="list-style-type: none">• Review the breastfeeding section of the Policy and Procedure Manual• Review any local agency guidelines for breastfeeding promotion and support with their local agency Breastfeeding Coordinator.
All WIC employees	Yearly	<ul style="list-style-type: none">• Participate in a minimum of one breastfeeding inservice trainings per year. This may include workshops, conferences, inservices, etc.
All CPA's and CA's	Within first 3 months of hiring	<ul style="list-style-type: none">• Complete the breastfeeding training module.• The local breastfeeding coordinator should orient them to:<ol style="list-style-type: none">1. Culturally appropriate breastfeeding promotion strategies2. Current breastfeeding management techniques to encourage and support the breastfeeding mother and infant3. Appropriate use of breastfeeding education materials4. Identification of individual needs and concerns about breastfeeding

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K.3. Breastfeeding Training and Inservices, Continued

Required staff training and inservice schedule (continued)

Staff Members	Frequency	Training/Inservices Provided
WIC Lactation Educator	Upon designation	<ul style="list-style-type: none">• Completion of the WIC Breastfeeding Module• Completion of a state approved lactation educator course (approximately 40 hour course with exam and/or required coursework)• Attendance required at the annual State WIC breastfeeding committee meetings
WIC Breastfeeding Peer Counselor	After they have completed the Peer Counselor Training Program	<ul style="list-style-type: none">• Routine weekly/monthly meetings with their breastfeeding coordinator. The frequency should be designated by the local agency in their peer counselor plan/grant.

**Training
required to
issue
breastfeeding
aids**

See this section for policies and staff training requirements for the issuance of breastfeeding aids.

K.4. Positive Breastfeeding Clinic Environment

Education materials and office equipment and supplies

All WIC clinics will create a positive clinic environment which clearly endorses breastfeeding as the preferred method of infant feeding.

Education materials available to participants will portray breastfeeding as the preferred infant feeding method in a manner that is culturally and aesthetically appropriate to the population groups being served.

- All printed and audiovisual materials will be free of formula product names. (Except for materials used to educate participants on the use of “sole source” formula.)
- All office supplies such as cups, pens, note-pads, posters etc., will be free of formula product names.

Positive attitude of staff

All local agency staff will demonstrate a positive attitude toward breastfeeding.

This may include but is not limited to:

- appropriate words of encouragement for all women
- avoiding overt or subtle endorsements of formula
- appropriate issuance of formula and breastfeeding food instruments
- appropriate referrals to health professionals, i.e. dietitians, lactation educators, physicians, etc.

Positive breastfeeding messages

Positive breastfeeding messages will be incorporated into all relevant education activities, materials and outreach efforts where infant feeding is addressed including:

- participant orientation programs and/or materials
- materials for professional audiences including printed, audio-visual, and display
- materials for clients including printed, audio-visual, and display

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K.4. Positive Breastfeeding Clinic Environment, Continued

Zero visibility of infant formula

The visibility of infant formula and bottle feeding equipment will be minimized.

- Formula and formula boxes will be stored out of view of the participants.
 - Baby bottles and nipples will be stored out of view of participants.
 - Staff are encouraged not to accept free formula from formula manufacturer representatives for personal use.
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Infant formula vouchers/ samples

Formula vouchers or samples will be provided only when specifically requested by the mother of the breastfed infant. A WIC CPA must authorize all distribution of infant formula to the breastfed infant.

- The use of supplemental formula will be minimized for breastfeeding infants by providing only the amount of formula that the infant is consuming at the time of voucher issuance.
 - All breastfeeding women will receive information about the potential impact of formula on lactation and breastfeeding before samples or additional formula vouchers are given (A flyer is available from the State WIC Office to give to women requesting formula.)
 - If a mother requests formula, she will be encouraged to supplement with iron fortified powdered formula rather than concentrated fluid formula.
 - Formula vouchers will not be issued to exclusively breastfed infants.
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Supportive environment and area to breastfeed in the clinic

A supportive environment where women feel comfortable breastfeeding their infants will be provided. Women will be welcome to breastfeed while in the clinic, e.g. provide an area away from the entrance, a private room if possible; a comfortable chair with arms if possible. A private room should also be available for mothers to pump.

The clinic should post signs and/or posters in prominent areas endorsing breastfeeding as supported and promoted in WIC clinics.

K.5. Breastfeeding Education for WIC Participants

Prenatal Survey on Infant Feeding

The Prenatal Survey on Infant Feeding is required for all pregnant women. The form is to be completed in duplicate. One copy must be filed in the participant's chart. A second copy may be given to the WIC peer counselors if she will be following up with the participant. The peer counselor may use the back of the form to record contact information with the participant. When the peer counselor has completed her follow-up with the client, the form with the recorded contact information must be returned to the clinic and filed in the participant's chart.

Breastfeeding education sessions

At a pregnant woman's initial certification visit, the CPA will elicit the pregnant participant's attitudes, concerns, and knowledge related to breastfeeding. Education will be provided to each participant based on the completed Prenatal Survey on Infant Feeding.

At least one breastfeeding class/individual contact must be offered to each pregnant woman enrolled in WIC. The following content must be covered in this individual/class contact:

- 1) Encouragement to breastfeed
- 2) Benefits of breastfeeding for mother and infant
- 3) Principles of breast milk production
- 4) Anticipatory guidance/avoiding problems
 - early breastfeeding (within 1 hour of delivery)
 - frequent breastfeeds (8-12 times/day)
 - rooming-in
 - avoiding artificial nipples

The above information may be covered during certification counseling, follow-up counseling, group classes, or breastfeeding support groups. It can be met with the State Class Outline entitled "Successful Breastfeeding: Getting Your Baby Off to a Healthy Start" or other approved breastfeeding classes.

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K.5. Breastfeeding Education for WIC Participants, Continued

**Breastfeeding
education
sessions
(continued)**

One breastfeeding class/individual contact must also be offered to each breastfeeding woman in all WIC clinics to encourage the continuation of breastfeeding. The following content must be covered in this class/individual contact:

- 1) Support/encouragement to continue breastfeeding
- 2) Problem solving
- 3) Anticipatory guidance for breastfeeding
 - adequate milk supply
 - growth spurts/feeding problems
 - working and breastfeeding
- 4) Feeding cues

The above information may be covered during certification counseling, follow-up counseling, group classes, or breastfeeding support groups. Additional state-approved breastfeeding class outlines are available from the State WIC Office.

K.6. Breastfeeding Positive Peer Influence

Utah's policy	In Utah, a mechanism needs to be implemented in each WIC clinic to integrate positive peer influence with breastfeeding education.
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What is positive peer influence?	While Congress has mandated that WIC promote and support breastfeeding, it is often difficult for the WIC staff to provide the immediate and more extended support that is essential if breastfeeding is to be a success. The rural nature of most of Utah is also a problem since distance to services, as well as a lack of breastfeeding specialists to provide supportive services, is common.
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Many WIC clinics have found peer counseling programs to be one of the most successful ways to promote breastfeeding among WIC participants. All WIC clinics are encouraged to have a peer counselor program. The State WIC Office has grant money available for local agencies to begin and/or assist in maintaining a peer counseling program.

There are many other ways to provide successful, positive peer support. They include but should not be limited to:

- breastfeeding hotlines
 - breastfeeding support groups
 - postpartum telephone contacts
 - and breastfeeding honor rolls with pictures displayed on clinic bulletin boards.
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What is a Breastfeeding Peer Counselor?	<p>A Breastfeeding Peer Counselor is a mother who:</p> <ul style="list-style-type: none">• has breastfed one or more infants• has successfully completed a breastfeeding peer counselor training program,• is competent to provide breastfeeding advice and information to WIC participants. <p>The main benefit is “mothers teaching mothers”.</p>
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K.6. Breastfeeding Positive Peer Influence, Continued

Role of a Breastfeeding Peer Counselor

A Breastfeeding Peer Counselor provides guidance and support as well as up-to-date information on breastfeeding to interested pregnant and lactating participants. Breastfeeding Peer Counselors are familiar with handling common problems encountered by breastfeeding women. They are trained to anticipate problems to help prevent their occurrence. The breastfeeding peer counselor is trained to refer more difficult problems to a trained Lactation Educator/Breastfeeding Coordinator.

Required Peer Counselor training

To become a Breastfeeding Peer Counselor, a woman must:

- become familiar with the philosophy and mission of WIC
- successfully complete the state approved 12 hour training program
- pass competency based evaluation, and
- successfully complete supervised experience (practicum)

WIC Breastfeeding Peer Counselor training program

Utah, in conjunction with Mountain Plains Region WIC States and USDA, has developed a training program for Peer Counselors entitled "WIC Breastfeeding Peer Counselor Training Program." This is a twelve hour training program with an administrative section, pre/post test and competency requirements. All peer counselors in Utah must complete this course prior to working as a peer counselor. The State Breastfeeding Coordinator is available to assist local agencies in starting and maintaining these programs.

Peer Counseling Grant Monies

The state has provided yearly grants to local agencies requesting monies to begin or maintain peer counseling programs. Each year the state WIC office will notify the local agencies of the availability of these monies and will send out a request for proposals. The intent is for the agencies to become self-sufficient in funding their own peer counseling programs.

K.7. Breastfeeding Program Evaluation

Policy

Public Law 101-147 requires that states evaluate their breastfeeding programs.

**Evaluating
local agency
breastfeeding
activities**

Local Agency evaluation of the their breastfeeding programs is contained in the annual nutrition education plan. This plan requires a review of breastfeeding statistics, a needs assessment, and a plan of action.

**Evaluating
State Agency
breastfeeding
activities?**

The state agency's goals and objectives are evaluated and included in the State Agency Goals and Objectives submitted to USDA annually.

K.8. Use of Breastfeeding Aids in Utah WIC Clinics

Principle

Breast pumps and other aids can be effective, and sometimes essential, tools for supporting breastfeeding. , When a lactation specialist has determined a need, breastfeeding aids are available for pregnant and breastfeeding participants of the Utah WIC Program. They are provided to participants free of charge. WIC staff may purchase breastfeeding aids for their own use, at cost (plus tax). A limited number of supplies are available.

Breastfeeding aids:

- are not a direct program benefit,
- are not to be used as breastfeeding incentives, and
- must be issued with professional discretion.

Local agencies are responsible for providing breastfeeding aids in accordance with this policy.

Purpose

All local agency staff who work with breastfeeding participants must comply with policy guidelines. This written policy:

- supports breastfeeding participants and staff,
- promotes consistency in education, counseling, and documentation;
- reduces liability, and
- ensures accountability for funds spent on breastfeeding aids.

Breastfeeding aids available

When funds permit, the following breastfeeding aids are available.

- Hand breast pumps
- Single pumping kits (for use with pedal pumps and electric breast pumps)
- Double pumping kits (for use with pedal pumps and electric breast pumps)
- Adapter kits (for use with the above kits)
- Breast shells
- Infant feeding tube devices (regular, and disposable - for short-term use)
- Electric breast pumps
- Pedal pumps

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K.8. Use of Breastfeeding Aids in Utah WIC Clinics, Continued

**In this sub-
section**

This sub-section includes the following information.

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K.8.1. General Guidelines

**Breastfeeding
aids are not a
direct program
benefit**

Breastfeeding supplies are not a direct program benefit that WIC agencies are required to provide. They are aids that qualified staff members may provide to certain WIC participants in need, in order to facilitate breastfeeding. If funds do not allow the state to provide breastfeeding aids free of charge to participants, they may be offered at cost, or at a reduced cost, to WIC participants.

**Breastfeeding
aids are for
WIC
participants
and staff only**

Breastfeeding aids can only be given to pregnant or breastfeeding participants of the Utah WIC Program. They are currently provided free of charge to participants.

WIC employees who are pregnant or breastfeeding and are not WIC participants may purchase equipment from the State WIC Office, at cost (plus sales tax,) for their own use. Payment should be made directly to the state WIC office. For a list of current prices, contact the State Breastfeeding Coordinator. Employees may also be able to obtain sample kits for personal use directly from the distributors.

If non-WIC members of the community, or non-WIC local agency staff members inquire about breastfeeding aids, refer them to a local breast pump rental station or business where supplies can be purchased. Local agencies should develop their own lists of local suppliers. The Utah Breastfeeding Resource Guide lists suppliers of equipment statewide. If there is no supplier in the area, contact the State Breastfeeding Coordinator or the manufacturer/supplier representatives listed in the above Resource Guide.

**Only a subset
of women need
breastfeeding
aids**

Breastfeeding aids are not needed by all breastfeeding mothers. Most women, in normal circumstances, can establish and maintain lactation without using breastfeeding aids. For some women, hand expression meets their needs to maintain comfort or express milk for later feedings. For other women, use of breastfeeding aids are necessary to establish or maintain lactation during extended periods of separation between mother and baby. Additionally, other special needs may also exist.

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K.8.1. General Guidelines, Continued

**Breastfeeding
aids must be
issued with
discretion**

Breastfeeding aids can be costly, and the WIC program does not always have funds available for their purchase. Breastfeeding aids are only issued when a lactation professional has documented a need.

To ensure cost effectiveness, local agencies must:

- provide instruction on hand expression to all lactating mothers (written materials and instructional video are available), and
- instruct mothers to maintain equipment provided to them: she may need it in the future.

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K.8.2. Who May Distribute Breastfeeding Aids

**Required staff
training**

Formal training is required for all staff who distribute breastfeeding aids or assist participants with their use. This usually includes Lactation Educators, CPAs, and Peer Counselors. This training must be provided by the representative of the company designated by the State WIC Office, by the local Breastfeeding Coordinator or their designated training coordinator, or by the State Breastfeeding Coordinator.

A training form must be completed and signed for each staff member trained. (See Form Section). Training objectives are listed on the form. Completion of the form indicates objectives have been met. This training form must be kept in the staff/peer counselor's training/module file.

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K.8.2. Who May Distribute Breastfeeding Aids, Continued

**Who may issue
breastfeeding
aids**

Staff qualified to issue breastfeeding aids are summarized in the table below.

Job category	May issue	Additional requirements
Lactation Educator	All breastfeeding aids	<ul style="list-style-type: none">• Completed required training and demonstrate competency with all breastfeeding aids including the infant feeding tube device• Component of job description/plan/evaluation
Competent Professional Authority (CPA)	<ul style="list-style-type: none">• Hand pumps• Breast shells• Electric pumps• Single and double pumping kits• Adapter kits• Pedal pump	<ul style="list-style-type: none">• Completed required training• Authorized by Breastfeeding Coordinator• Component of job description/plan/evaluation
Peer Counselor	<ul style="list-style-type: none">• Hand pumps• Breast shells• Pedal pump• Adapter kits	<ul style="list-style-type: none">• Completed required training• Component of job description/plan/evaluation• Authorized by local agency Breastfeeding Coordinator
WIC Clerk	None (See note)	

Note: If the WIC clerk is also a Peer Counselor or a Lactation Educator, she may be qualified to issue certain breastfeeding aids. In these unique situations, her responsibilities must be clearly delineated in her position description or plan, and she must meet the additional requirements specified for that job category listed above.

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K.8.2. Who May Distribute Breastfeeding Aids, Continued

**Role of the
WIC Peer
Counselor**

The Peer Counselor must always perform within her job description. Peer Counselors do not routinely issue breastfeeding aids. However, because they work directly with participants who may be using supplies, or who may benefit from their use, it is essential that Peer Counselors be trained in the availability and use of all breastfeeding aids.

The Peer Counselor plays a key role by listening to participants' concerns, identifying those in need of breastfeeding aids and/or professional assistance, and referring those participants to the LE.

Some Peer Counselors are also LEs or WIC clerks. If they are to issue any breastfeeding aids, then this must be clearly specified in their job description/plan. If a local Breastfeeding Coordinator finds it necessary to allow trained Peer Counselors to issue hand pumps and/or breast shells, this must be stated in the local agency breastfeeding plan and approved by the State Breastfeeding Coordinator.

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K.8.3. Reducing Liability

Breastfeeding aids are not exchanged or returned

Except for the electric breast pumps, participants receive only new breastfeeding aids. Breastfeeding aids are not to be exchanged between mothers or returned to the clinic. Mothers must be encouraged to keep their supplies in a safe place when they are no longer needed, so that they will be available for future use (i.e., a subsequent pregnancy or separation from infant).

Staff must work within job description

Only trained, qualified staff may issue equipment. For all staff who issue equipment, this responsibility must be included in their job description, performance plan, or evaluation.

Participants must sign a release for all equipment received

Every participant who receives any supply must sign a written release form specific for that supply. Her signature verifies the following:

- she is informed of her rights and responsibilities
- the WIC program is not responsible for any personal damage caused by the use of the supply
- the local agency may release or request medical information from the participant's health care providers (listed on the form)
- she consents to be touched when necessary for instruction or use of the breastfeeding aid;
- she has received written guidelines for pumping and storing breast milk (printed on the back of the participant's copy of the release form).
- For the electric pumps and pedal pumps, she also assumes responsibility to return the pump in good condition.

Release forms are included in the Form Section. All release forms are completed in duplicate. File the original in the participant's chart, and give the carbon copy to the participant. Progress notes are printed on the back of the original (for clinic use), and Guidelines for Pumping and Storing Breast Milk are printed on the back of the participant's copy.

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K.8.3. Reducing Liability, Continued

**Written and
verbal
instructions
required**

Appropriate written materials and verbal instructions must be given to every mother who receives breastfeeding equipment. Required instructions are included in the guidelines for each type of supply, in this document. Instructions provided must be clearly documented on the release form, which is filed in the participant's WIC chart.

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K.8.4. Required Documentation

Importance of documentation

To ensure accountability and avoid liability, all local agencies must comply with documentation requirements in this policy.

Breastfeeding supply log

Each agency must maintain a log documenting issuance of all breastfeeding aids, including:

- participant name and WIC ID number
- supply issued
- date issued, and
- initials of staff member issuing supply.

Record issuance of all electric pumps and pedal pumps on an Electric Breast Pump Tracking and Maintenance form (see Form section). Two versions of this form are available. The local breastfeeding coordinator may select the version preferred for her clinic(s).

Document issuance of all other breastfeeding aids on the Monthly Breastfeeding Supply Log and Inventory (see Form Section).

Document in the participant's record

The following information must be documented in the participant's chart:

- supply issued
- date issued
- reason
- instructions given
- plan for follow-up, if needed
- signed release form.

Note: all of the required information is included on the release form.

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K.8.4. Required Documentation, Continued

**Document
electric pump
issuance in
screen 108**

When you loan an electric pump or a pedal pump to a participant, document this in screen 108 with a severity 1 comment. This notifies clinic staff, at vouchering, that a participant has a pump and should be referred to the lactation educator.

Example: Has electric pump (#.....). See (LE).

Remember: after subsequent vouchers have been produced, you must once again enter the comment in screen 108.

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K.8.5. Ordering, Inventorying and Storing Breastfeeding Aids

Ordering breastfeeding aids

A limited number of breastfeeding aids are available for clinic use. The local Breastfeeding Coordinator can order these supplies from the state WIC office on the appropriate order form (see Form section).

If supplies are in stock, orders are usually received at the clinic within two weeks.

Orders are shipped via UPS or other ground carrier, or they may be picked up at the state WIC office (if previously arranged - requires 2 working days).

Inventorying breastfeeding aids

Breastfeeding aids are costly. Each local agency must demonstrate accountability for breastfeeding aids purchased with WIC funds. All equipment must be inventoried each month, Use the forms found in the Form Section of this manual. A copy of the Monthly Breastfeeding Supply Log and Inventory Form and the Electric Breast Pump Inventory Form must be sent to the State WIC Office biannually. A record of the inventory must be kept at the clinic.

Inventory reports (for the previous month) are due at the state office January 15 and July 15. If an agency fails to submit the required inventory reports, orders for that agency will be suspended until the inventory is received by the state office.

Separate inventories required for Medela and Ameda-Egnell breastfeeding aids

Some agencies have Medela and Ameda-Egnell electric pumps available. This requires that both brands of pump kits also be available. A separate inventory must be maintained for Medela and Ameda-Egnell pumps and kits. The Monthly Breastfeeding supply Log and Inventory (Form Section) includes both types of equipment. Clinics using only Medela pumps may copy only the front side of the form.

Storing breastfeeding aids

All breastfeeding aids must be stored in a secure location: a locked cabinet, closet, or room. Report missing supplies to the State Breastfeeding Coordinator.

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K.8.5. Ordering, Inventorying and Storing Breastfeeding Aids, Continued

**Report lost or
missing pumps
immediately**

Any broken, lost, or missing electric pumps must be reported to the State WIC Office immediately.

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K.8.6. Guidelines for Hand Breast Pumps

Who may need a hand pump Hand breast pumps are provided to breastfeeding women at the discretion of the local Lactation Educator. It is appropriate to provide pumps for women who express an interest in pumping and who are motivated to provide their infants with expressed breast milk. In choosing to provide a pump, the LE should believe that the pump will enhance the breastfeeding experience or will help the mother continue successful breastfeeding.

Hand pumps may be given for the following reasons, in order of decreasing priority:

- 1) Women for whom an electric breastpump is indicated, but have no access to an electric pump or electricity.
 - 2) Women who are working or going to school.
 - 3) Women who are frequently or occasionally separated from their infants.
 - 4) Women who would like to pump for any reason that would help make breastfeeding more successful.
-

Rule out manual expression as an option A hand pump may not be needed if the mother can meet her needs through hand expression. All mothers should be instructed in hand expression, prior to issuing a breast pump.

Who may issue a hand pump Lactation Educators may issue hand pumps. Trained CPAs may also issue hand pumps. Peer counselors may issue, within bounds of approved local agency policy, with authorization from the local Breastfeeding Coordinator.

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K.8.6. Guidelines for Hand Breast Pumps, Continued

**Documentation
and instructions**

Document issuance of each hand pump on the Monthly Breastfeeding Supply Log and Inventory Form, including participant name and WIC ID number.

Complete the Breastfeeding Aid Release Form in duplicate. The participant receives the carbon copy, and the original is filed in her WIC chart.

Instruct the participant on the Guidelines for Pumping and Storing Breast Milk, printed on the back of the release form, and the instructional booklet in the pump package.

**Value of hand
breast pumps**

The hand pump currently available costs the WIC Program approximately \$15.45.

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K.8.7. Guidelines for Single and Double Breast Pump Kits and Adapter Kits

Introduction Single and double pump kits and adapter kits are available for both the Medela and Ameda-Egnell electric breast pumps and for Medela pedal pumps. The brand of kit must match the pump, i.e., only use Medela kits with Medela pumps and Ameda-Egnell kits with Ameda-Egnell pumps.

All kits also include a hand pump.

Who may need a single or double pump kit Pump kits are appropriate for women who are pumping with an electric pump or a pedal pump. They are issued for the following reasons, in order of decreasing priority.

- 1) Women who are separated from their infants due to prematurity, illness, or other reasons (see also indications for electric pumps).
 2. Women pumping to increase their breastmilk production.
 3. Women with severe engorgement..
 4. Women who are renting an electric pump while they are working or going to school.
 5. Women who are using a pedal pump.
 6. Other appropriate reasons (approved by CLE).
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Adapter kits The WIC Program has several types of adapter kits available. A participant may need an adapter kit if she already has a pump kit, which needs upgrading to meet her needs. The following kits are available:

- Double pumping adapter kits: to upgrade a single pumping system or a hand pump to a double pumping system.
 - Electric adapter kits: to convert the hand pump to a single electric kit.
 - Manual adapter kits: to provide the needed parts for hand pumping, if mother used an economy kit at the hospital designed for electric pumping only.
 - Spare parts: call the State WIC Office regarding the availability of spare parts.
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K.8.7. Guidelines for Single and Double Breast Pump Kits and Adapter Kits, Continued

Who may issue a pump kit Trained LEs may issue all pump kits. Trained CPAs and Peer Counselors may also issue pump kits, if authorized by the local agency breastfeeding coordinator.

Documentation and instructions 1) Complete the appropriate release form, as described in the table below.

IF participant is receiving	THEN complete...
A pump kit and an electric pump or a pedal pump	The Electric Pump Loan Agreement and Release form, and proceed with instructions for loaning the electric pump. This form includes a space to document issuance of a pump kit.
A pump kit only	The Breastfeeding Aid Release Form. File the original in the participant's chart, and give the carbon to the participant.

- 1) List the participant's name and WIC ID number on the Monthly Breastfeeding Supply Log and Inventory. Indicate the date in the appropriate column.
 - 2) Instruct the participant in use of the pump kit. Review Guidelines for Pumping and Storing Breast Milk (on back of the participant's copy of the release form), and the instruction booklet accompanying the kit.
-

Value of pump kits and adapter kits The approximate cost of various kits to the WIC Program is summarized in the table below.

Single Pumping Kits	\$19.00
Double Pumping Kits	\$25.00
Double Pumping Adapter Kits	\$17.00
Electric Conversion Kit	\$5.00
Manual Conversion Kit	\$6.00

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K.8.8. Guidelines for Breast Shells

Who may need breast shells

Breast shells may be provided to women who have flat, inverted or sore nipples. During the prenatal and postpartum period, breast shells may help to pull out flat or inverted nipples. For postpartum women, shells may help reduce pain caused by sore nipples coming in contact with clothing.

Some of the kits currently available include two styles of shell backs: one for inverted nipples (prenatal or postpartum use,) and one for sore nipples (postpartum use).

Who may issue breast shells

- CLEs may issue breast shells.
 - Trained CPAs may also issue breast shells, with authorization from the CLE for each piece of equipment.
 - Peer Counselors may issue breast shells, if designated by local agency policy, and authorized by the local Breastfeeding Coordinator.
-

Documentation and instructions

Complete the Breastfeeding Aid Release Form, in duplicate. File the original in the participant's WIC chart, and give the copy to the participant.

You must provide verbal and written instructions when issuing breast shells. Written instructions are included in the Form section.

Value of breast shells

Breast shells cost the WIC Program approximately \$6.00.

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K.8.9. Guidelines for Infant Feeding Tube Devices

Who may need infant feeding tube devices

Infant feeding tube devices are to be used for infants and mothers with special needs. Appropriate circumstances for the use of the infant feeding tube device include:

- Babies with sucking problems.
- Babies who have difficulty latching on.
- Mothers with low milk supply, or relactating mothers.
- Babies who are reluctant to nurse.
- Premature babies, especially when adapting to feeding at the breast.
- Infants with inadequate weight gain.
- Infants with cleft palate.
- Adopted babies.
- Other special situations (call State CLE for approval.)

Types of infant feeding tube devices available

The regular system is designed for long-term or repeated use. A starter system is also available which is designed for short-term use (up to 2 weeks.) The starter system is much more economical, and is preferred if it can meet the participant's needs. Spare tubing is also available for the regular system.

Who may issue an infant feeding tube device

Only trained LEs can issue infant feeding tube devices. The LE must demonstrate competency and receive authorization from the local Breastfeeding Coordinator prior to issuing infant feeding tube devices. Use of this device requires specialized assessment skills and diligent follow up. If a participant requires an infant feeding tube device and a LE is not available in clinic, call a state CLE.

NOTE: high-risk infants must be followed by a RD. The LE issuing the infant feeding tube device must consult with the RD (if she is not a RD.) The infant's high risk care plan must note the use of the infant feeding tube.

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K.8.9. Guidelines for Infant Feeding Tube Devices, Continued

Documentation and instructions

Complete the Breastfeeding Aid Release Form in duplicate. File the original in the participant's chart, and give the participant a copy. The release form also includes permission to release information to the participant's health care provider. The infant's physician must be notified, within three days, when an infant feeding tube device is issued.

Intensive instruction, both verbal and hands-on, must be given to participants using an infant feeding tube device. An instructional booklet is included in the product package. Additionally, an instructional video (English only) is available. While it is recommended that the participant view the video in clinic, it may be loaned for a short term.

Follow-up required

Mothers using an infant feeding tube device usually have high-risk infants, requiring timely follow-up. The following protocol must be followed.

- Weight of infant done prior to set-up (nude or dry diaper - document and be consistent).
- Phone follow-up within 24 hours.
- Mother returns to clinic within 72 hours for follow-up weight of infant (nude or dry diaper - same as in number 1).
- In some situations, a baby-weigh scale can provide useful information on volume of feedings provided when using the infant feeding tube device.

If the instruction and follow-up are provided by the another health care provider (e.g., physician, nurse practitioner, nurse-midwife, lactation consultant), this must be documented on the release form, and an appropriate plan for follow-up agreed to by the WIC LE and the participant.

Value of infant feeding tube devices

Infant feeding tubes cost the WIC Program approximately:

- starter: \$9.00
- regular: \$26.00

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K.8.10. Guidelines for Electric Breast Pumps

General information

The Utah WIC Program has several types of portable electric breast pumps available. The program owns several Medela Lactina Plus and Lactina Select pumps. In addition, Ameda-Egnell Lact-E and Elite pumps are available for loan.

The purpose of the electric pumps is two-fold:

- 1) To encourage employees to provide their infants with breastmilk. One pump must be available for breastfeeding WIC employees to use while at the worksite. If more than one staff member in a clinic is using the pump, a cooperative arrangement must be instituted for sharing the pump.
- 2) To help lactating WIC participants to provide their infants with breastmilk, when special circumstances would not enable mothers to establish lactation or continue breastfeeding under normal conditions. Participants are welcome to come into the clinic to use the pump, according to need (they must schedule this in advance). An electric pump may also be loaned to WIC mothers when there is a critical situation involving mother-infant separation and/or medical problems.

An electric breastpump may not be loaned to a WIC mother if a WIC employee needs to use the pump while working.

Requesting electric breast pumps

If a pump is needed, contact the state Breastfeeding Coordinator. The following information must be provided:

- The address where the pump will be located/stored when not loaned out.
 - An assurance the pump will be kept in a locked location.
 - Name of the staff person who will be in charge of the pump usage and inventory.
 - Name of the staff member in charge of maintenance.
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K.8.10. Guidelines for Electric Breast Pumps, Continued

**Reasons to
loan an electric
pump to a
participant**

Electric pumps may be loaned to participants for the following reasons:

- Mother or infant hospitalized.
- Premature infant unable to nurse.
- Infant with severe feeding problem (e.g., cleft lip or palate, insufficient suck).
- Infant sick and unable to nurse.
- Mother is sick and/or on contraindicated medication short-term.
- Separation of mother and infant for more than 24 hours.
- Mother of twins or triplets.
- Mother or infant unable to nurse.
- Other reasons (requires state CLE approval).

**Who may issue
an electric
pump**

Trained LEs can issue electric pumps. Trained CPAs may also issue electric pumps, if trained and authorized by the local Breastfeeding Coordinator.

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K.8.10. Guidelines for Electric Breast Pumps, Continued

Loaning procedures

Follow the required procedures for loaning an electric pump, as described in the table below.

Step	Action
1	Mother must be an active WIC participant or WIC staff member.
2	Determine if the mother needs a pump kit. If so, issue the mother the appropriate single or double pump kit for her needs. If the mother already has a kit, try to locate the same brand of pump, to prevent issuing another kit.
3	Complete the Electric Breast Pump Loan Agreement and Release Form, in duplicate. Note that: <ul style="list-style-type: none">• The form requires two forms of identification from the participant or a responsible third party: a social security number and driver license or state ID number. This is a requirement of the rental agreement contract and is essential for pump security. It is not intended to create a hardship for mothers who lack either of these forms of ID. If a responsible third party provides the identification, that person must also sign the loan/release form. Exception: occasionally a WIC participant is new to this country and does not have the required 2 forms of ID, nor do they have another responsible party with 2 forms of ID. Call the State WIC Breastfeeding Coordinator for assistance. <ul style="list-style-type: none">• The participant, the WIC staff member loaning the pump, and the responsible party must sign the loan form.
4	Demonstrate use of the pump and kit to the participant. Be sure to point out the instructions for pumping and storing breast milk, printed on the back of the participant's copy of the loan form.
5	Establish a plan for follow-up with the participant, and document on the loan form. Pumps on loan must be tracked weekly.
6	File the loan form original in the clinic's pump log book, and give the copy to the participant. When the participant returns the pump to the clinic, file the original loan form in the participant's WIC chart.
7	Document pump loan on screen 108, with a severity 1 comment. This will alert all staff members that the participant has a pump and should see the LE each time she comes to the clinic.

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K.8.10. Guidelines for Electric Breast Pumps, Continued

Loaning procedures (continued)

Step	Action
8	Monthly vouchers are recommended, especially if it is difficult to contact the participant.
9	Document pump loan on the Electric Breast Pump Tracking and Maintenance Form (see Form Section of this manual). The Form section includes two versions of this form. The local agency breastfeeding coordinator must choose one version for use in their clinic(s).

Use of electric pumps and pedal pumps by non-WIC staff

Health department staff who are not WIC employees may use a clinic pump if:

- a breastfeeding WIC staff member who is using the pump agrees to share use of the pump,
 - their use does not inconvenience WIC staff or participants who are eligible to use the pump, and
 - the local Breastfeeding Coordinator approves.
-

Electric breast pump and pedal pump security

- Pumps must be secured in a locked room or cabinet when not in use.
 - Pumps on loan must be tracked weekly. Monthly vouchers may enhance the tracking process.
 - All pumps must be inventoried monthly. The local agency breastfeeding coordinator must maintain all inventories on file.
 - Electric pumps that the state has purchased are added to the clinic's inventory when they are received. If a pump is returned to the state office, document this on the inventory.
 - Upkeep and repair of owned pumps is the local agency's responsibility. These pumps are under manufacturer's warranty for one year.
 - WIC pumps that are part of a rental program are covered by an insurance policy with the manufacturer. They are not part of the local agency inventory.
 - If any electric pumps are lost, stolen, or require repair, please contact the state WIC office immediately.
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K.8.10. Guidelines for Electric Breast Pumps, Continued

Guidelines for pump recovery

WIC benefits cannot be denied to a participant for failing to return an electric pump or a pedal pump or participate in tracking efforts.

If the participant becomes lost to follow-up, or the pump is suspected lost or stolen, the clinic may take the following actions:

- Contact any or all parties listed on the pump loan/release form, including the participant's partner, friend, physician, and hospital listed.
- 1) Contact the state WIC office regarding filing a police report.

Cleaning and maintenance

The local Breastfeeding Coordinator must designate a staff person responsible for pump cleaning and maintenance.

Electric pumps must be cleaned:

- when returned to the clinic after loan to a participant
- after each use, when used by more than one staff member
- after use in the clinic by a participant.

Clean electric pumps as described in the following table.

Stage	Description
1	Prepare 10% Clorox solution by mixing 1 part Clorox with 9 parts water. You must use the brand name "Clorox". This solution is not stable, and must be mixed fresh each day. You may also use a commercial cleaner specified for breast pumps, such as Cavicide or other approved germicidal solution.
2	Wear gloves when cleaning electric breast pumps.
3	Apply the cleaning solution to the pump (spray or wipe).
4	Leave the solution on for 30-60 seconds.
5	Rinse thoroughly with clean water.
6	Document date cleaned and staff initials on the electric breast pump inventory.

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K.8.10. Guidelines for Electric Breast Pumps, Continued

Caution: Remember that breast milk is a body fluid. Follow local health department precautions on handling of body fluids when in contact with breast milk. (Note: Universal Precautions do not apply to breast milk, but caution is recommended.)

**Value of
electric breast
pumps**

The portable electric breast pumps used by the Utah WIC Program cost approximately \$500.00 - \$800.00.

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K.8.6. Guidelines for Pedal Pumps

Who may need a pedal pump Pedal pump breast pumps are provided to breastfeeding women at the discretion of the local Lactation Educator. It is appropriate to provide pumps for women who express an interest in pumping and who are motivated to provide their infants with expressed breast milk. The pedal pump is an ideal low cost alternative for women who work or go to school. In choosing to provide a pump, the LE should believe that the pump will enhance the breastfeeding experience or will help the mother continue successful breastfeeding.

Pedal pumps may be given for the following reasons; in order of decreasing priority:

- 1) WIC staff members who are working and breastfeeding
- 2) Women for whom an electric breast pump is indicated, but have no access to an electric pump or electricity
- 3) Women who are working or going to school
- 4) Women who are frequently or occasionally separated from their infants
- 5) Women who would like to pump for any reason that would help make breastfeeding more successful

Single or double pumping kits can be issued to be used with the pedal pump.

Rule out manual expression as an option A pedal pump may not be needed if the mother can meet her needs through hand expression. All mothers should be instructed in hand expression, prior to issuing a breast pump.

Who may issue a pedal pump Lactation Educators may issue pedal pumps. Trained CPAs may also issue pedal pumps. Peer counselors may issue pedal pumps within bounds of local agency policies and with authorization from the local Breastfeeding Coordinator.

All staff or peer counselors who issue pumps must have received the appropriate training. The training form needs to be completed by the Breastfeeding Coordinator and must be kept in the staff/peer counselor's training/module file.

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K.8.6. Guidelines for Pedal Pumps, Continued

Documentation and instructions	Document issuance of each pedal pump on the Electric Breast Pump Tracking and Maintenance Form, including participant name and WIC ID number.
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Complete the Electric Breast Pump Loan Agreement and Release Form in duplicate. The participant receives the carbon copy, and the original is filed in her WIC chart.

Instruct the participant on the Guidelines for Pumping and Storing Breast Milk, printed on the back of the release form.

Follow the loaning procedures for electric breast pumps found in this section. Follow steps 1-4, 6, 7 and 9.

Required follow-up	Establish a plan for follow-up with the participant and document on the loan form. At a minimum, the participant must receive one contact within the first week and monthly thereafter.
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Other pump procedures	<p>Follow the electric pump procedures for:</p> <ul style="list-style-type: none">• Use of electric breast pumps and pedal pumps by non-WIC staff• Electric breast pump and pedal pump security• Guidelines for pump recovery• Cleaning and maintenance
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Value of hand breast pumps	The pedal pump currently available costs the WIC Program approximately \$30.00.
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